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FACSIMILE TRANSMITTAL

Date: February 2, 2005

To: Examiner Daniel Leon Robinson
Group 3742
United States Patent and Trademark Office

Fax No.: 1-703-872-9306 (centralized facsimile number)

From: Mary M. Lee

My File No.: 5300-001

Re: Amendment
Application No.: 09/610,196
Title: HAIR STYLING BRUSH WITH REVERSE AIR FLOW
Pages Including Cover Sheet: 7

Comments:

Please see attached.

☐ The original of this correspondence will follow.

☒ No original of this correspondence will follow.

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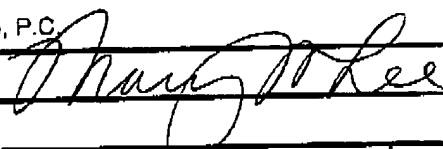
PTO/SB/21 (09-04)

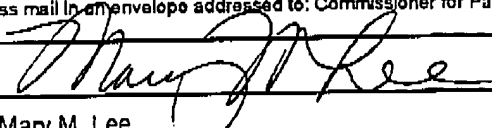
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| | | | |
|---|----------------------|------------------------|----------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/610,196 | |
| | Filing Date | 07/05/2000 | |
| | First Named Inventor | Tommy Leon Myatt | |
| | Art Unit | 3742 | |
| | Examiner Name | Daniel Leon Robinson | |
| Total Number of Pages in This Submission | 7 | Attorney Docket Number | 5300-001 |

| ENCLOSURES (Check all that apply) | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (5 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): Fax Transmittal - 1 page |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|----------|--------|
| Firm Name | Mary M. Lee, P.C. | | |
| Signature |  | | |
| Printed name | Mary M. Lee | | |
| Date | 02/02/2005 | Reg. No. | 31,976 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
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| Signature |  | | |
| Typed or printed name | Mary M. Lee | Date | 02/02/2005 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Applicant(s): Tommy Leon Myatt

Serial No.: 09/610,196

Filed: July 5, 2000

For: HAIR STYLING BRUSH WITH

Group No. 3742

Examiner: Daniel Leon Robinson

Att'y Dkt. No. 5300-001

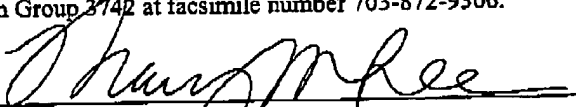
**MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450****AMENDMENT****Introductory Comments**

In response to the Office action mailed January 19, 2005, please amend the application as requested herein.

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8(a)

I hereby certify that, on the date shown below, this correspondence is being sent by facsimile transmission to Examiner Daniel Leon Robinson in Group 3742 at facsimile number 703-872-9306.

Date: February 2, 2005


Mary M. Lee